Freeform Search

Database:
US Pre-Grant Publication Full-Text Database
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JPO Abstracts Database
Derwent World Patents Index
IBM Technical Disclosure Bulletins

Term: web page same confirm$5 and insurance

Display: 10 **Documents in Display Format:** CIT **Starting with Number** 1

Generate: ○ Hit List ◉ Hit Count ○ Side by Side ○ Image

Search Clear Interrupt

Search History

DATE: Monday, March 29, 2004 Printable Copy Create Case

Set Name side by side	Query	Hit Count	Set Name result set
	DB=USPT; PLUR=YES; OP=ADJ		
L14	web page same confirm$5 and insurance	18	L14
L13	web page same confirm$5 and insurance same renewal	0	L13
L12	web page same confirm$5 with insurance same renewal	0	L12
L11	web page same confirm$5.ti.	0	L11
L10	web page and insurance same renewal	1	L10
L9	insurance near5 (person or agent or representative) and L8	74	L9
L8	web page same confirm or confirmation and insurance	819	L8
L7	field agent same insurance and renewal	1	L7
L6	insurance agent with renewal	1	L6
L5	insurance agent and renewal	12	L5
L4	insurance and renewal.ti.	3	L4
L3	L2 and renewal	6	L3
L2	insurance agent same computer	28	L2
L1	insurance agent	126	L1

END OF SEARCH HISTORY

13/9/1 (Item 1 from file: 625)
DIALOG(R)File 625:American Banker Publications

0250707
Curb on non-cash broker payments fought
Insurance Accountant - August 14, 2000; Pg. 1; Vol. 11, No. 32
ARTICLE TYPE: News
DOCUMENT TYPE: Newsletter LANGUAGE: English RECORD TYPE: Fulltext
WORD COUNT: 626

TEXT:
The **insurance** industry is trying to slow a **renewed** effort by securities regulators to stop insurance companies from providing incentives besides commissions to brokers selling unregistered variable annuities and variable life insurance into qualified retirement plans.

"This is a very significant and important part of the group life market," said Jack Dolan, a staff official of the American Council of Life Insurers, which is at the forefront of the effort to delay and/or stop efforts to bring this market under the oversight of federal securities regulators.

The group life and annuity market that would be covered by the proposed rule constitutes a substantive part of the multi-trillion-dollar qualified benefit market.

ACLI lawyers Aug. 4 fired off a letter to the Securities and Exchange Commission asking the agency to deal with the issue through its normal notice-and-comment basis--and not on the expedited basis sought by the National Association of Securities Dealers.

The NASD has asked the SEC for expedited action on a rules change that would put sale of unregistered variable annuities and variable life insurance under its non-cash compensation regulation. The rule limits the manner in which NASD brokers may pay or accept non-cash compensation in connection with the sale or distribution of variable contracts.

The NASD contends that a 1993 law eliminated statutory restrictions on its authority to apply sales-practice rules to sale of unregistered securities except for municipal bonds. On the other hand, the ACLI position is that NASD "abused congressional intent" in seeking to as-sert jurisdiction under the 1993 law.

"The NASD position is that this is a routine codification of an existing staff position," said John Baker, a lawyer with Stradley, Ronon, Stevens & Young, LLP in Washington. It asked the SEC to approve the NASD rule change without seeking public comment, Baker said, which "is not unusual for very routine filings."

The NASD said in seeking the expedited handling that accelerated approval "will benefit NASD members by enabling broker/dealers and other interested parties to identify which NASD rules apply to exempted securities in a more efficient manner."

The ACLI learned of the filing through the NASD **Web** site, which was not particularly publicized, Baker said, and is asking the SEC to seek public comment before approving it.

"This is an unusual step on the ACLI's part, but perfectly appropriate under the circumstances, since otherwise any comment would be too late to do any good," Baker said.

"The ACLI letter certainly undercuts the NASD's position that the filing is so routine, so I would anticipate that the SEC will now solicit comments

in
the normal manner," he added.
Stephanie DuMont, the NASD lawyer handling the issue, did not return phone
calls seeking comment.
In asking the SEC to delay action on the expedited request, the ACLI said
that, "Although proper identification of applicable NASD rules is a worthwhile objective, there are several additional considerations that do not warrant an accelerated period of self regulatory approval."
The ACLI letter was signed by Carl Wilkerson, chief counsel, securities.
The ACLI contends that further regulation is not needed, because sale of
these products are "extensively regulated by the Dept. of Labor under the ERISA statute, by state insurance commissioners under comprehensive regulatory structures, and by other federal laws.
Those comments were in a 1999 letter to NASD asking it to drop the proposal from its agenda of proposed rules and positions.
"The redundant layering of the NASD's conduct rules in this area is obsolete and unnecessary," the ACLI said in its 1999 comment letter. "Moreover, the institutional purchasers of unregistered variable contracts can be justifiably distinguished from retail customers needing the protection of the NASD conduct rules..."

COMPANY NAMES (DIALOG GENERATED): American Council of Life Insurers ; Association of Securities Dealers

13/9/2 (Item 2 from file: 625)
DIALOG(R)File 625:American Banker Publications

0234004
Travelers Wraps 7 Coverages In 1 Policy for Small Banks
American Banker - March 22, 1999; Pg. 11; Vol. 164, No. 54
SECTION HEADING: Community/Regional
ARTICLE TYPE: News
DOCUMENT TYPE: Journal LANGUAGE: English RECORD TYPE: Fulltext
WORD COUNT: 516

BYLINE:
By MICHAEL O'D. MOORE

CAPTION:
Badalucco, photo

TEXT:
To simplify insurance purchases for smaller banks, a Citigroup unit has introduced a product that wraps seven liability and crime insurance lines into one policy.
Called Travelers Advantage for Financial Institutions, the policy covers director's and officer's liability, employment practices liability, fiduciary liability, banker's professional liability, financial institution bond, computer crime, and ransom and extortion coverage.
Banks may pick what they need and choose individual coverage limits without creating a spider **web** of individual policies to cover business risks.
"There's one coverage, one policy, one carrier, one premium payment, and one set of standards," said Andrew Badalucco, a vice president at Travelers Bond, a division of Citigroup's Travelers Property Casualty.
The idea has already struck a chord with a handful of banks.
First Virginia Banks Inc. bought the coverage because renewing a comprehensive single policy is much simpler.

"Spread out your coverage decisions, and they get made independently of each other," said Judith A. Holmes, risk manager for the Falls Church, Va., banking company and agent for its insurance unit. Making one decision "that addresses all or most of your risks in these major categories once a year makes for a better approach," she said.

Ms. Holmes said buying a broad policy also protects the company against gaps in coverage that can emerge when policies expire on different dates.

Community banks must make complicated insurance decisions even though they have fewer specialized risk management officers who know the nuances of insurance policies, said Susan Horsfall, who sells insurance as an agent for National City Corp. in Cleveland.

The Travelers product is a step toward simplicity at a time when community banks need coverage as sophisticated as that of their bigger rivals, she said.

Ms. Horsfall said two of her community bank clients, which each have less than $500 million of assets, plan to buy the Travelers product when their current **insurance** is up for **renewal** this year. Because premiums for
such broad coverage are large, the policy is also profitable to sell, she said.

Though policies for the two community banks have not been formally priced, Ms. Horsfall said the coverage is likely to cost more than similar insurance offered through national or state trade associations. But she said the coverage is broader and the price will be competitive with commercially available insurance.

Mr. Badalucco said combining seven types of insurance should produce savings for most banks. Depending on what options a bank selects, premium savings could be as high as 5%, he said.

One cost-saving feature in the policy is umbrella "excess coverage" protection.

Typically, a bank pays to add coverage on each line of insurance it is buying, Mr. Badalucco said. But with this package of policies, a bank may buy extra coverage that "floats" over all the policies. If a bank needs more coverage in a particular area, this extra coverage may be tapped, he explained.

First Virginia's Ms. Holmes described this feature as unique and attractive. She said she expects to sell the insurance to many of her smaller-bank clients.

COMPANY NAMES (DIALOG GENERATED): Bond ; First Virginia Banks Inc ; National City Corp ; Travelers Property Casualty

13/9/3 (Item 3 from file: 625)

DIALOG(R)File 625:American Banker Publications

0194164

State Survey

Insurance Regulator - February 3, 1997; Pg. 1; Vol. 9, No. 5
ARTICLE TYPE: News
DOCUMENT TYPE: Newsletter LANGUAGE: English RECORD TYPE: Fulltext
WORD COUNT: 1,535

TEXT:

Maine Blues Penalized Record Amount

Blue Cross and Blue Shield of Maine received penalties totaling $62,000 in three separate enforcement actions from the Maine Bureau of Insurance. The sum represents the largest penalty levied by the bureau on the Maine Blues.

Blue Cross paid a $51,000 penalty after the insurer allegedly marketed and sold certain HMO contracts that had not been reviewed and

approved by the bureau.

Although Blue Cross filed the hospital **network** option HMO contract forms, the filing didn't indicate that the product required the use of a hospital **network** different from the one on file approved by the bureau, it said. The insurer sold the product without bureau approval of the limited **network** , the underlying contracts and the product rate structure, the bureau charged.

In the consent orders, Blue Cross didn't admit to any violations. The company has since received approval of pertinent amended forms.

The second penalty of $10,000 resulted from Blue Cross' alleged refusal to increase mental health benefits for an individual who requested the additional coverage to be added to the individual health insurance policy. State law requires insurers to add additional mental health coverage upon request.

The bureau levied its third penalty by fining Blue Cross for its allegedly repeated failure to respond to a bureau inquiry for additional rate filing information within the mandatory 30 days.

In another matter, he bureau was finishing up hearings on proposed HMO joint ventures between Blue Cross and Blue Shield and hospital plans last week. The issues raised by the public included monopoly concerns and charitable trust questions (See IR, Jan. 20.)

General American Gets Conditional Approval

The Missouri Department of Insurance has approved General American Life Insurance Co.'s proposed corporate restructuring as long as the company gets approval for for any transfer of stock and adopts a plan on assets.

On Nov. 13, General American asked the department to approve a restructuring that would shift policyholders' ownership interests to a new mutual holding company under a bill passed last year.

Director Jay Angoff approved the plan last week provided that General American adopt a plan on how the mutual holding company's excess earnings and other assets will go to the benefit of policyholders.

The company must also protect the interests of policyholders in issuing debt.

A company official testified at a Dec. 19 public hearing that the insurer has no plans for a sale or transfer of stock, but a public offering could have proceeded unless the special condition was attached to the MDI order.

Under the restructuring, the mutual holding company would have 100% of the shares in a new stock holding company (GenAmerica Corp.), which in turn would own a new stock General American. The new General American stock life company would continue to have the assets and insurance operations of the current insurer, explained the department.

The mutual company has $207.5 million in written premium and is the state's largest domestic life insurer.

Retaliatory Tax Proposal Concerns Comp Insurers

A tax proposal by the Florida Department of Revenue is worrying workers comp insurers there because it would mean a higher cost of doing business, they say.

The proposal would affect the state's so-called retaliatory tax calculation. The Revenue Department has proposed removing the Florida Workers Compensation Administration Trust Fund assessment from the state retaliatory tax calculation. That's because it believes the assessment is a "special purpose assessment," rather than a tax, noted the Alliance of American Insurers.

These taxes are called retaliatory by the industry because they apply to insurance companies that operate outside their state of domicile. These taxes are imposed by one state on a second state if that second state imposes higher taxes on an insurer than the first. The tension in the mutually interdependent system is liked by insurance industry because they say it generally works to keep taxes lower and more uniform.

The Alliance's tax and finance vice president, Steve Broadie, submitted testimony last week in Tallahassee opposing the department's

proposal.

"This particular assessment, however, is not a special purpose assessment, because there is no directly corresponding benefit associated with it," Broadie stated. "For that reason, it more closely resembles a tax."

Also, implementing the Revenue Department's proposal could contradict the Florida statute that currently permits all workers comp insurers a deduction for that assessment against any other tax levied on them by the state, the Alliance noted.

Kentucky Insurer Told To Exit Group Market

Centennial Life Insurance Co. must exit the group health insurance market in Kentucky and is facing sanctions from the Kentucky Department of **Insurance** for informing policyholders it was canceling or not **renewing** policies.

The department is recommending that policyholders shop elsewhere based on the domiciled company's financial troubles.

Insurance Commissioner George Nichols III announced Jan. 29 Centennial will exit both the individual and group markets for major medical health insurance and will later determine the penalties based partially on the cooperation he receives from the company and what he finds he can do after a review of state law.

Since the Lenexa-based insurer decided to cease selling individual policies in Kentucky, the commissioner decided it will also be required to stop selling group policies. He has yet to determine when Centennial must leave the group health market.

Centennial had told many policyholders that their coverage would terminate Feb. 18, but the department told it to agree to extend coverage through the end of the month.

Under health reforms, state law requires a company to give one year's notice to the department and to policyholders before it ceases doing business in the state. It also prohibits an **insurer** from refusing to **renew** a policyholder.

"After reviewing the company's finances, we have concluded that these policyholders would be better protected with another company," Nichols said. He noted that the company should have discussed its financial troubles with him much earlier.

Centennial had more than 2,000 individual insurance policyholders as of Jan. 15, according to information it submitted to the regulators. It had 93 policyholders under 24 group health contracts, the department stated.

Other lines of insurance sold in the state by the company would not be affected by the company's exit from the major medical market, the department said.

TDI Illustrations Draft Provokes Life Insurers

The Texas model illustrations regulation draft is under fire for apparently having mandatory formats not compatible with some systems, including font type, for the retroactive penalties insurers could incur under it and for the "little consideration" given to cost, feasibility or timeframe of implementation.

Robert Lehmert, a second vice president with the Guardian Life Insurance Co. of America in New York noted that the Texas draft varies so much from the NAIC model that many companies cannot use the Texas format in other states.

Lehmert spoke at a life and annuities market conduct conference in New York on how Guardian had implemented the NAIC model illustrations law. It took 15 months to implement it, even though the company "had it relatively easy" because it had well developed systems capabilities and other advantages, Lehmert said.

All in all, it shows an example of why national regulation may be preferable in lieu of state-by-state variation, Lehmert said in his address to fellow life insurers Jan. 28.

However, the rulemaking process for the proposed regulation is not over yet, although some believed the draft had already become law.

The rulemaking process is taking longer than expected and the regulation has moved into its fourth draft, delaying the earliest implementation date from Sept. 1, 1997, to Jan. 1, 1998, according to

the Texas Department of Insurance.

Many elements of the Texas draft have Guardian wondering how even it can handle such requirements as specific print size and typefaces that are not possible in COBOL mainframe systems. Also, the draft requires insertion of specific policy and insured information throughout and has four different formats for various products.

There are millions in expenses required to produce "marginal benefits"oregulators should consult with systems experts to learn the implications of specifying details, Lehmert alleged.

The mandatory formats and other features, with the questions they prompt ("If policy loans are to be shown at a maximum guaranteed rate, does this kill variable policy loan interest rates?") contribute to the probability that many companies will not meet the Sept. 1, 1997, deadline for compliance, according to Lehmert, who was, at the time, not aware that the earliest possible effective date had been postponed.

The TDI staff is reviewing comments solicited on the third draft, said the department spokesperson. The TDI Life Disclosure group is working on another draft that would have to go to Insurance Commissioner Elton Bomer and then the Texas Register. The next step would be hearings, the spokesperson noted. "The industry has been involved from the very start. We are doing our best to do what is best for the citizens of Texas and also not being burdensome to industry," he said.

Other state drafts or rules have minor compliance variations from the NAIC model, Lehmert noted. For example, Florida requires the printing of an agent's license number on the illustration, and California has a "bright yellow highlighter" regulation on illustrations for those above age 60.

COMPANY NAMES (DIALOG GENERATED): Alliance of American Insurers ; American Life Insurance Co ; Blue Cross and Blue Shield ; Bureau of Insurance ; Centennial Life Insurance Co ; Department of Insurance ; Florida Department of Revenue ; Florida Workers Compensation Administration Trust Fund ; Guardian Life ; Kentucky Insurer Told To Exit Group Market ; Missouri Department of Insurance ; Revenue Department ; Texas Department of Insurance ; Texas Register

13/9/4 (Item 4 from file: 625)

DIALOG(R)File 625:American Banker Publications

0172134

Midwest Zone: Indiana Department To Automate Licensing

Insurance Regulator - May 29, 1995; Pg. 4; Vol. 5, No. 21
SECTION HEADING: State Survey
ARTICLE TYPE: News
DOCUMENT TYPE: Newsletter LANGUAGE: English RECORD TYPE: Fulltext
WORD COUNT: 165

TEXT:

The Indiana Department of **Insurance** is automating agent license **renewal** and is hoping to pick out the bad apples out of the bunch by hooking up to the NAIC's Producer Database.

Boarding onto the NAIC database would prevent bad agents from selling insurance in the state, according to Chief Deputy Commissioner Marjorie Maginn.

The new automated system will reward the good agents by allowing them to be licensed in a few days rather than in several weeks, Maginn said. Combined with the preventive measures of the PDB's Producer Information **Network** , Indiana department's system will be a powerful tool to efficiently license agents.

PDB was unveiled at the Spring National Meeting of the NAIC in March. It has six pilot states -- Illinois, Iowa, Ohio, Wisconsin, Utah and Florida in its program.

NAIC Recording Secretary Josephine Musser, who chairs the committee association's Special Committee on Information Systems, hailed the technology as an exciting step in financial services regulation and urged involvement from all levels, including insurance companies.

COMPANY NAMES (DIALOG GENERATED): Indiana Department of Insurance ; PDB ; Special Committee on Information Systems

13/9/5 (Item 5 from file: 625)
DIALOG(R)File 625:American Banker Publications

0147631
REENGINEERING UPDATE: Loan Operations Offer Big Opportunities for Reengineering
American Banker - June 20, 1994; Pg. 7A; Vol. 159, No. 117
SECTION HEADING: MANAGEMENT STRATEGIES
ARTICLE TYPE: Feature Article
WORD COUNT: 1,148

BYLINE:
Harry S. Wortmann

CAPTION:
Mr. Wortmann, photo

TEXT:
FINANCIAL EARNINGS Group recently helped a major Southeastern bank reengineer its loan operations. With eight decentralized loan centers, the bank was piling up paper and needed better communication among its branches, especially when providing loan documentation.

The information solution included storing microfilm images of loan documents along with retrieval equipment equipped with fax-back capabilities. In addition to reducing a forest's worth of paper, the bank enjoyed a 27% increase in overall efficiency in loan operations and reduced full-time staff by 20 employees.

One would think that after hundreds of years of lending by banks, loan operations would have been perfected by now. To the contrary, loan operations offer significant opportunities for reengineering at every stage.

Many banks still view loan operations as little more than a shuffling of paperwork to complete a loan package for filing in the vault. And, loan operations are an extremely paper-intensive exercise because of the vast amount of documents required for completing a loan file. Most banks have focused primarily on organizing documents in an ordered fashion. The results are large filing operations that retain tons of paper and require a significant amount of space.

Financial institutions have numerous approaches for handling large volumes of paper - ranging from the simple filing of loan files by date order to the replacement of documents with microfilm or stored images on optical disks.

Within the past several years, technology systems have been developed that permit banks to reengineer file access. One employs barcoding in conjunction with color coding. This improves traditional methods, automating placement and tracking loan files using a PC and wand reader.

These filing operations normally use alphabetical or numerical formats, and are implemented to satisfy a high-demand retrieval rate. However, our reviews show the majority of paperwork stored in a loan file is seldom retrieved, and usually only in cases of losses in past-due loans that need to be charged off.

Date filing's advantage is that it entails little installation expense and no hardware requirements. Filing by date order differs from traditional numerical or alphabetical ordering. Since most loans are time sensitive (30-year mortgages, three-year car notes, etc.), filing by date provides quicker retrieval and improved index systems. The disadvantage, however, is the financial institution is still left with a large manual filing operation.

Microfilm can be built around the date filing concept. Hundreds of documents and files can be stored on a single roll of film, reducing paper and expanding filing capabilities. In addition, when compared to image technology, microfilm is far less expensive to implement.

Microfilm, though, does mean an initial investment in equipment and will require a manual filing operation for storing and retrieving film.

Image technology is an increasingly popular approach for storing loan files. Like microfilm, image technology converts loan documents into images. Instead of film, these images are scanned by computer and stored on optical or magnetic disks. The disks are accessed via a terminal in a PC-based system, calling up inquiries for file documents instantly.

Optical disk storage can be installed through local area networks, providing instant retrieval access to multiple processors, underwriters, and operators on the **network** . The system can also be set up in wide-area networks through which loan officers, either in branches or regional sites, can access loan documents from any connected site.

The advantages of image technology are many: virtual elimination of paper, instant document retrieval, and the elimination of manual filing operations.

The disadvantages of image technology are the costs associated with implementing the system. Even as it is becoming a widely used technology, banks and financial institutions must weigh the value of high-speed retrieval and optical storage against the needs of their loan operations.

In addition, many states have statutes prohibiting complete substitution of original documents with images stored on optical disk. This isn't new. Banks went through similar regulations concerning checks and microfilm. Check images stored on microfilm are now recognized in every state as legal documents, and as image technology proliferates, more states will modify their laws governing optical images.

Image technology and microfilm use are based on the assumption that all information on paper documents is necessary. A careful review of a financial institution's overall lending process will yield which documents are critical to a loan file for future storage.

Eliminating superfluous paper splits filing into critical and noncritical documents. Depending on a bank's loan operations, a combination of manual storage and microfilm or image technology can be implemented to cover the need to keep hard copies of critical documents and store noncritical documents.

Improvement in document handling and archiving is just one area. Other opportunities to improve loan operations involve outsourcing specific functions.

One example of this is insurance collection agencies' ability to match homeowner and automobile **insurance** records with company records at the time of **renewal** . When the match occurs, the company contacts the customer to ensure the property is properly covered.

The reengineering of loan operations also extends to collection functions. Loan collection technology ranges from intelligent workstations to automated call-distributing systems. These technologies can be designed to fit the specific size of a bank's collection needs, and should be reviewed carefully to determine the appropriate system.

An on-line **network** is necessary to tie all lenders together into the collection system. On-line systems provide the bank with more accurate reports for tracking the collection efforts of both the department and the individual loan officer. This technology can be combined with call distribution systems that allow the host computer to download past-due files and other records to any on-line workstation.

In addition, call-distribution systems generate a constant number of calls to customers and match them with corresponding collection agents. These systems are dynamic and can adjust the daily call pacing

automatically to maximize the number of "hits," or customer contacts. These systems can enable a collector to handle as many as 600 contacts in a day.

As with any reengineering effort, an overall strategy must include streamlining all functions in an operation.

Platform automation is another technology that affects loan operations. Documents and data are uploaded to a bank's host system, enabling front-end functions such as the setting up of loans and opening of documents to immediately be stored into the loan filing operation.

This can also be combined with image technology, uploading images such as loan documents, photos, and insurance forms into the host system.

The improvements a bank can realize by reengineering its loan operations - reduced dependence on paper and greater storage capabilities are more than cosmetic. These technologies can yield bottom-line results in staff, overhead, and improved collections.

Don't underestimate the profitability to be gained in improving the total way your bank handles loans. Improving the spread isn't the only way to improve profitability.

Mr. Wortmann is a principal of Financial Earnings Group, Atlanta.

COMPANY NAMES (DIALOG GENERATED): FINANCIAL EARNINGS Group

13/9/6 (Item 1 from file: 637)

DIALOG(R)File 637:Journal of Commerce

Gen-Xers don't surf the net for insurance

JOURNAL OF COMMERCE (JC) - September 30, 1998
By: ANGELA CALISE DAUER JOURNAL OF COMMERCE STAFF
Edition: Five Star Section: INS Page: 5A
Word Count: 783

MEMO:
Complexity of sale hinders purchases, study says

TEXT:
While the **Internet** plays an increasingly important role in the lives of people between the ages of 21 and 43, this has yet to translate into insurance sales, a recent survey by IVANS has found.

While this demographic spends nearly one business day 6.3 hours on line each week, only 3 percent are buying goods and services through the **Internet** , and even less than that are buying insurance.

"Although Generation Xers, like their parents, are still not comfortable with purchasing insurance online," said Chip Lawson, senior product manager of IVANS, "they are friendly with the Net and will eventually become more comfortable with making financial and insurance-based transactions online."

For now, though, one problem continues to be the complexity of the transaction and the high number of options to choose from, he said .

"That in itself doesn't stop them, but you only do an **insurance** transaction twice a year" at **renewal** time, he said. "That means people have to relearn a complicated transaction."

ENORMITY OF TRANSACTION STOPS SALES

Other factors seem to be scaring potential online insurance purchasers off, he said such as the enormity of the transaction.

"If I'm buying a book, there's no huge financial transaction," Mr. Lawson said. "If I don't want it, I go to the post office and return it."

But if the purchaser makes a mistake choosing an insurance product, the purchaser can be exposed to huge financial penalties, he said.

Another turn-off is a perceived lack of privacy, he said, noting "there's a lot of personal information people have to give when filling out an application."

Nevertheless, the survey gives insurers and agents some hope for expanded use of the **Internet** in the coming years.

Thirty-seven percent of those queried said that they were likely to shop for automobile or homeowners insurance online. Of that group, 33 percent said that they would consider making those purchases online.

"While this percentage of potential buyers is not extremely large, it does represent a formidable base of potential customers for insurers," Mr. Lawson said.

"Generation Xers have not yet been looked to as a new consumer base by many insurers. To reach new customers, insurers must incorporate interactive technology and the **Internet** into their traditional methods of selling."

"SLOW-MOVING AREA FOR AGENTS'

Right now, "this is a slow-moving area for agents," who tend to have "the if-it-isn't-broken, don't-fix-it mentality," he said, conceding that currently, "it's not like it's broken."

In fact, he noted that some agents vow to never do business online. "Agents range from "over my dead body will I have the **Internet** in my office' to those aggressively chasing online business," he said.

For those entrepreneurial agents, Mr. Lawson advises them to provide better service online, such as claims services. "We've got to simplify the process," he said. "Life insurance is pretty straightforward." Still, like every other business, agencies are "motivated by money. They have the incentive to sell more," he said, adding that once consumers become better accustomed to the **Internet** , buying insurance online will not be as intimidating.

"The first purchase is the hardest transaction to do online because there are no histories built," he said. "Renewals are easier."

It should also assuage any fears consumers have to know that nothing they do on the Net is binding, said Mr. Lawson. "The policy is not bound until you sign that paper," he said.

More than any other age group, Generation Xers have embraced the **Internet** and feel most comfortable using it, with almost half 48 percent surveyed saying that they currently use the **Internet** . "An impressively high number," says to Mr. Lawson.

OTHER GROUPS HAVE **INTERNET** ACCESS

Of other age groups, 29 percent of those between 45 and 64 and 9 percent of those aged 65 and older said they have access to the **Internet** . As for the reasons people surf the Net, 39 percent said they use it for business or work-related purposes, and 31 percent said they use it for entertainment reasons.

"Generation Xers are often categorized as pessimistic and self-indulgent, although they seem to be optimistic about technology and are willing to use it for both work and pleasure," Mr. Lawson said.

There are some down sides to doing business on the **Internet** , Mr. Lawson acknowledged, such as it "it commoditizes the product completely it's all price, price, price. It's a major problem."

Mr. Lawson cited another reason insurance agents who choose to ignore cyberspace need not despair too much. "There is still some value," he said, "in human interaction."

The survey, undertaken by the Princeton, N.J.-based Opinion Research Corporation International, was conducted in July and includes information culled from more than 500 respondents.

DESCRIPTORS: INSURANCE; **INTERNET** ; COMPUTER; STATISTIC; REPORT; TECHNOLOGY; US

COMPANY NAMES (DIALOG GENERATED): Opinion Research Corporation

13/9/7 (Item 2 from file: 637)

DIALOG(R)File 637:Journal of Commerce

Complexity cited for shortage of online insurance purchases

JOURNAL OF COMMERCE (JC) - April 02, 1998
By: RONALD GIFT MULLINS JOURNAL OF COMMERCE STAFF
Edition: Five Star Section: INS Page: 5A
Word Count: 594

MEMO:
For a copy of the Ivans survey, available after April 15, call Jim Kalach at (203) 532-2139.

TEXT:
While consumers are quick to spend their money with online music stores and booksellers, they are not as eager to conduct insurance transactions on the World Wide **Web** , according to an Ivans survey.

Ivans, a Greenwich, Conn., provider of technology services to the insurance industry, sponsored the survey among more than 2,000 consumers in the United States. Opinion Research Corporation International, Princeton, N.J., conducted the survey.

Results highlight the growing trend of consumers using online services. Of the 29 percent of the U.S. population who have access to the **Internet** from home, more than 50 percent say they are interested in banking online, and 44 percent are interested in purchasing consumer goods like CDs and books.

For home insurance and auto insurance purchases, the figures dropped to 27 percent of all **Internet** users.

"Although the **Internet** offers incredible opportunities for e-commerce, it is clear that consumer demand for online products and services varies widely, depending on the industry and the complexity of the transaction," said Dan Carmichael, IVANS president and chief executive. "Insurance has significant variables and can involve more complex decision-making and options."

The survey results were conclusive in determining that the insurance industry still has some way to go in convincing consumers to buy or submit policies and claims online. Of the **Internet** users, half indicated they would be comfortable submitting claims electronically.

As for the reasons those surveyed didn't want to conduct insurance transactions online, 50 percent indicate they prefer more personal attention; 34 percent say security is an issue; and 8 percent say the process would be too complicated.

"This study demonstrates that opportunities exist for companies willing to venture into the online marketplace, but the insurance industry still has to convince consumers that their individual needs and questions will be

addressed in the same way as by an agent," Mr. Carmichael said. "A balance between e-commerce and one-to-one personal services will be critical."

Marc Barach, senior vice president of marketing at InsWeb, San Mateo, Calif., said results can be affected by the way questions are phrased, though he had not seen the survey questions.

Several surveys done by Ins- **Web** , he said, indicated consumers are interested in finding out about insurance on the **Internet** .

A majority of consumers who had online access said they used the Net to comparison-shop for auto insurance and to conduct research, Mr. Barach said.

He observed that about 81 percent of auto **insurance** policy holders automatically **renew** each year, yet half know they could get insurance cheaper if they took the trouble to shop. The reasons they don't are that it is too time-consuming, too complicated, involves too many forms and may lead to unwanted sales pressure.

InsWeb provides a service by bringing buyers and sellers of insurance together. "We let consumers sign on and provide as much information as they want, and then provide them with insurers that will provide them with insurance," Mr. Barach said, adding that InsWeb had been providing this service very successfully.

E-commerce is growing, especially for companies offering consumer products Amazon Books, CD-Now and Chase's online banking, for example. However, it is still unclear how quickly consumer attitudes to insurance will change, since many still request one-to-one attention, Ivans said.

The **Internet** marketplace as a whole is not set to take credit card sales right now, Mr. Barach said. But transactions involving insurance will grow as consumers become comfortable with using the **Internet** to buy products as intangible as insurance, he said.

DESCRIPTORS: INSURANCE; US; TECHNOLOGY; COMPUTER; **INTERNET** ; REPORT; IRANS; OPNION RESEARCH CORPORATION INTERNATIONAL; FINANCIAL; BANKING; CONSUMER; MEDIA
COMPANY NAMES (DIALOG GENERATED): InsWeb ; IVANS

13/9/8 (Item 3 from file: 637)
DIALOG(R)File 637:Journal of Commerce

BRIEFS
JOURNAL OF COMMERCE (JC) - July 02, 1997
By: From Wire and Staff Reports
Edition: Five Star Section: INS Page: 7A
Word Count: 514

MEMO:
INSURANCE BRIEFS

TEXT:
ALLSTATE, ORACLE SIGN

TECHNOLOGY AGREEMENT

REDWOOD SHORES, Calif. Oracle Corp. reached an agreement with Allstate Insurance Co. to provide technology to enable the efficient enterprise-wide management of data.

Oracle will support Allstate's transition from its existing mainframe-based environment to a more decentralized **client / server** environment.

Oracle(R) Universal Server will support applications being provided to the majority of All-

state's 50,000 employees over time.

Oracle Corp. is the world's leading supplier of software for information management, and the world's second largest software company.

FLORIDA OFFICIAL DEMANDS

STATE FARM RATE FREEZE

TALLAHASSEE, Fla. Unable to block State Farm's 24 percent property insurance rate increase, Insurance Commissioner Bill Nelson demanded the company freeze rates for two years.

Mr. Nelson sent the company a petition that 100 Central Florida homeowners sent him complaining about premiums saying the cost of homeowners' insurance "has become unreasonable."

He said he will urge lawmakers to repeal an arbitration system that let State Farm win the increase June 20 even though he had rejected it.

Spokeswoman Yvette Register said State Farm made no promises to hold the line on premiums for their 1 million Florida policyholders, saying they only ask for increases needed to cover potential storm claims.

Homeowners' premiums have gone up an average of 88 percent statewide since Hurricane Andrew struck South Florida in 1992.

NEW JERSEY GOVERNOR

SIGNS SCALED-BACK BILL

PATERSON, N.J. Gov. Christie Whitman signed a watered-down auto insurance law that blocks a 3 percent rate increase that would have started Tuesday.

The new law stops automatic rate increases the state had allowed each July 1. However, the law allows the insurance commissioner to grant rate increases if insurers can prove they need one.

The bill also eliminates surcharges to motorists who accumulate points from traffic infractions, although insurers will still be able to charge them until March 1, 1998. The surcharges will be replaced by a new "tiered" rating system.

John Tiene, executive director of the New Jersey Insurance News Service predicted the law "will do nothing to reduce premiums or the cost of auto insurance."

LLOYD'S SETS UP

AVIATION BUSINESS UNIT

LONDON Lloyd's of London began has begun operating its aviation section as a separate business unit within the corporation of Lloyd's.

It is the sixth such business unit created since reorganization of services began last year as part of Lloyd's rescue Reconstruction & Renewal program.

Lloyd's Aviation provides aviation loss adjusting and affiliated services both to the Lloyd's market and other insurers worldwide.

COLORADO COMMISSIONER
WANTS ASSET DECLARATION

DENVER Colorado Insurance Commissioner Jack Ehnes has ruled Blue Cross and Blue Shield of Colorado must place a value on its assets before converting to a for-profit company.

The value of the 60-year-old insurer has been a key issue during Blue Cross' conversion. State law requires the company to transfer its fair market value to a foundation to serve the health needs of Colorado.

Blue Cross argues it should not have to value itself because the insurer plans to donate 100 percent of the cash raised from an initial public offering of its stock to the foundation.

DESCRIPTORS: INSURANCE
COMPANY NAMES (DIALOG GENERATED): Allstate ; Blue Cross and Blue Shield ; Lloyd 's Aviation ; New Jersey **Insurance** News Service ; Oracle Corp ; Reconstruction & **Renewal** ; Spokeswoman Yvette Register

13/9/9 (Item 4 from file: 637)
DIALOG(R)File 637:Journal of Commerce

BRIEFS
JOURNAL OF COMMERCE (JC) - october 02, 1996
By: From Wire and Staff Reports
Edition: Five Star Section: INS Page: 10A
Word Count: 500

MEMO:
INSURANCE BRIEFS

TEXT:
NATIONWIDE PLANS

APPEAL IN FLORIDA

COLUMBUS, Ohio Nationwide will appeal last week's ruling by the Florida Insurance Department that it repeal part of its recent 27 percent increase in homeowners rates. The department said the company had based its rates on a computer model that overstated its losses from four previous hurricanes.

Our homeowners policies in Florida were far underpriced under the previous rate structure and the new rates reduce the gap between anticipated income and what's actually needed to pay for projected claims and operating claims," said Jerry Daughty, Nationwide vice president.

Under a provision in the state law, Nationwide, the fourth largest insurer in Florida, implemented the 27 percent increase four months ago without the prior approval of the insurance department. The company is entitled to request a public hearing to appeal the department's decision.

MID OCEAN GETS OK

FOR SINGAPORE BRANCH

HAMILTON, Bermuda Catastrophe reinsurer Mid Ocean Limited received formal approval Wednesday from the Monetary Authority of Singapore to open a branch office. The branch will be responsible for the company's marketing and underwriting in East Asia, excluding Japan.

Lee Soo Kwan was named principal officer and general manager of the branch, which will soon begin underwriting for the January 1997 renewal period. Ms. Kwan was also named vice president of Mid Ocean Reinsurance Co. Ltd. She joined the company from Krandona Re in Singapore.

UTAH SOFTWARE INSURER

MERGES WITH AON UNIT

SALT LAKE CITY ITA Insurance Inc., which insures software and high-tech companies, merged with Rollins Hudig Hall of Utah, a subsidiary of Aon Group in Chicago.

The new company, Aon Risk Services Inc. of Utah, will be based in Salt Lake City. A purchase price was not disclosed.

Premium volume of the combined entities, with 36 employees, totaled approximately $50 million in 1995, said Joe Henriod, ITA's president, who becomes executive vice president of the merged company.

CONFERENCE PROMISES

IMPORTANT INSIGHTS

NEW YORK The Association for Information Technologies will hold a one-day conference, the "First Annual United Nations Symposium, on the **Internet** and Related Technologies, and Diplomacy in the Electronic Era," on Thursday, Oct. 31, at the United Engineering Center in New York.

AIT promises the conference will offer important insights from computer industry experts on the benefits of the **Internet** , the World Wide **Web** , and related technologies, to ambassadors, delegates and diplomats from the 185 member-states of the United Nations and to AIT member-corporations with international business goals, including insurance multinationals.

For further details, contact AIT at (516) 269 6713.

CALIFORNIA BILL TARGETS

UNINSURED DRIVERS

SACRAMENTO, Calif. California Gov. Pete Wilson signed legislation to require motorists in the state to show proof of auto **insurance** to **renew** their vehicle registration.

The legislation requires motorists to show proof of insurance when stopped by police, otherwise their vehicle could be impounded or they could have their driver's license suspended and end up in county jail.

State officials estimated uninsured motorists in California cost insured motorists between $1 billion to $2.3 billion each year.

DESCRIPTORS: INSURANCE
COMPANY NAMES (DIALOG GENERATED): Aon Group ; Aon Risk Services Inc ; ITA ; Mid Ocean Limited ; Mid Ocean Reinsurance Co Ltd ; Nationwide ; NEW YORK The Association for Information Technologies ; Related Technologies ; Rollins Hudig Hall ; SALT LAKE CITY ITA Insurance Inc ; United Engineering Center

13/9/10 (Item 5 from file: 637)
DIALOG(R)File 637:Journal of Commerce

London Insurers Postpone Electronic System
JOURNAL OF COMMERCE (JC) - April 28, 1995
By: LIZ SHUKER Special to The Journal of Commerce
Edition: Five Star Section: INS Page: 7A
Word Count: 441

TEXT:

LONDON - With less than 20 brokers currently placing insurance risks in the London market by electronic means, the London Insurance Market **Network** (Limnet) has opted to postpone the deadline for marketwide use of the electronic placing support (EPS) system by six months.

Brokers and underwriters in London's three insurance markets Lloyd's of London, the Institute of London Underwriters and the London Underwriting Centre will now work to a staggered schedule spread over nine months, which will culminate in electronic support for all risks by July 1, 1996.

As well as giving companies more time to install the computer equipment needed to create electronic insurance contracts, revision of the original January 1996 deadline will alleviate **insurers** ' EPS obligations in the busy **renewal** season at the start of the year.
The objective must be achieved through a gradual buildup of usage," said Limnet. "A big-bang approach would not be workable, and adhering to the original deadline would put "unacceptable' pressure on the market during the peak renewal season."

Limnet, which is sponsored by Lloyd's, the Institute of London Underwriters, the London Insurance Brokers Committee and the London Insurance and Reinsurance Market, is the largest electronic communications **network** of its type in the world.

The revised schedule requires brokers to have software systems installed by Sept. 1, 1995. By October, each broker must have placed its first live risk. Come April 1996, at least 50 percent of risks from each broking firm must be processed electronically, rising to 100 percent by July.

Although electronic placing, whereby brokers offer risks to underwriters by electronic means and receive a similar electronic response, has been slow to take off in parts of the London market, Limnet denies that brokers have failed to respond adequately to the initiative.

"Many brokers were locked into the schedule for our revised version of EPS. When this was delayed to the end of 1994, it inevitably put brokers behind in their schedules," said Limnet.

An estimated 130 brokers are still placing risks arising from personal contact with underwriters, and using paper contracts. This is particularly so in the Lloyd's market.

While nearly 100 percent of risks transacted by London insurance companies are supported electronically, the equivalent figure for Lloyd's is believed to be as low as 5 percent, despite the inherent cost savings of such a system. Lloyd's last year announced it would save UK20 million (US$32 million) annually once EPS was working.

Limnet chairman Dieter Losse said, "London is leading the world with these initiatives. We shall start reaping benefits as volumes build up over the next 12 months, but we are laying foundations for efficient operation well into the next century."

DESCRIPTORS: INSURANCE; UK; COMPUTER; TECHNOLOGY
COMPANY NAMES (DIALOG GENERATED): Institute of London Underwriters ; London Insurance Brokers Committee ; Reinsurance Market

13/9/11 (Item 6 from file: 637)
DIALOG(R)File 637:Journal of Commerce

Health Care Insurance Discounts May Just Shift Expense to Others
JOURNAL OF COMMERCE (JC) - July 22, 1991
By: MERRILL GOOZNER Chicago Tribune

Edition: Five Star Section: INS Page: 10A
Word Count: 1352

MEMO:
Table: DISPARITY IN MEDICAL COSTS (not included in the database)

(Third of a Series)

TEXT:
CHICAGO - One strategy the cash-strapped state of Illinois uses to hold down health-care costs is to wield its market clout and haggle over the price of hospital care.

In the last two years, state benefit managers negotiated rate discounts from a "preferred" **network** of 155 hospitals. It then encouraged state workers to use the **network** by cutting in half their co-payments for admission to a **network** hospital.

The hospitals grudgingly gave the discounts because they wanted business from the state's 300,000 employees, dependents and retirees, the largest self-insured group in Illinois. About three-fourths of those insured by the state government who required hospitalization last year used the **network** .

How can hospitals in the **network** , many facing cash shortages of their own, afford the discounts? For most it's easy. They raise prices for their full-paying customers.

Health industry observers call it cost-shifting. Economists call it variable pricing.

Whatever it's called, the result is a zero-sum game in society's effort to hold down the skyrocketing cost of health care, which is expected to consume a record 12.4 percent of the nation's gross national product this year. Hospital expenditures, which accounted for 38 percent of the nation's $675 billion health care tab last year, raced ahead at a nearly 12 percent clip, or twice the rate of inflation.

From the state's point of view, its program was a big success. According to Lynn Calame, benefits manager for the state, the program saved taxpayers $20 million last year, or nearly 5 percent of the state's total health care bill.

Although the state's bill went up $39 million, or 10.7 percent, from the year before, it would have been a lot worse without the program. "We've had hospitals tell us that they've lost money on us," Ms. Calame said.

Hospital administrators dissect the program differently.

"No one pays sticker price on a car any longer, and very few pay the regular posted charges at a hospital," said Andrew Knauf, vice president of finance for Gottlieb Memorial Hospital in Melrose Park, Ill., which admitted a handful of state-insured patients last year as one of the hospitals in the **network** .

"The commercial insurance companies and the other payers who are paying charges at something over cost are picking up the shortfall," he said.

For years hospitals claimed that the government's Medicare program for the elderly and disabled and Medicaid program for the very poor were paying less than the true cost of service. Hospitals made up the difference by raising rates of full-paying customers, acting, in essence, as unofficial tax collectors.

Now they're seeing many insured and self-insured organizations move in the same direction as Medicare and Medicaid. These groups use their size

and purchasing power to negotiate discounts, either on their own, like the state's hospital **network** , or through their health maintenance and preferred provider organizations.

The bottom line is a breath-stealing surge in premiums paid by employers with traditional fee-for-service health insurance plans. Their premiums are rising much faster than the overall price of health care because they cover not only their own employees' bills, but also shortfalls in government programs and the uncollectable bills due from care given the uninsured.

Indeed, as more employers shift to some form of managed care, where their discounts reduce, if not eliminate, their participation in paying for those who pay less than full fare, the ranks of those left holding the bag for the shortfalls grow smaller and smaller. The result is exorbitant increases in traditional health **insurance** premiums.

The projected **renewal** cost of the average comprehensive corporate medical plan is expected to increase 24 percent to 32 percent this year, according to a survey of health insurers by Noble Lowndes, an employee benefits consulting firm.

A. Foster Higgins & Co., another consulting firm, surveyed its clients and reported a 46 percent jump in health care premiums in the last two years, rising to $3,161 from $2,160 per employee.

Even the Health Insurance Association of America, which represents insurers, admits premiums will rise as much as 16 percent this year, even though overall health care costs rose "only" 11 percent to 12 percent last year.

"Somewhere between 30 percent and 40 percent of an employer's premium increase is due to cost shifting," claims Richard Clarke, president of the Healthcare Financial Management Association, a trade group for hospital finance officers. "Somewhere around 25 percent of a dollar the hospital will charge is due to lack of payment of all or part of the bill by somebody else."

Officials in charge of the federal government's program for financing care for the elderly bristle when accused of systematically underpaying hospitals. "Medicare is paying full freight in the sense that when Medicare squeezes hospitals, the hospitals are more likely to respond by increasing efficiency," said Guy King, chief actuary for the Health Care Financing Administration.

"With all payers being so cost-conscious now, it's very difficult for the provider to just shift costs," he said.

Still, the Congressional Budget Office estimates hospitals shift $8 billion a year onto paying customers because of shortfalls in collections from government programs and the uninsured. Most of the charitable care provided by hospitals and physicians goes to the 30 million to 35 million Americans who do not have health insurance. Surveys suggest the uninsured receive about two-thirds of the health care of insured patients, frequently through hospital emergency rooms when medical problems have reached a crisis stage and require expensive care.

"The fully insured are paying for those people who are in many cases employed but for whatever reason their employer will not or cannot provide health insurance," Mr. Clarke said.

"The employer paying health insurance premiums for his employees is paying for someone else's employees, perhaps a competitor's. That's why there's such an outcry that there has to be a fairer way of providing coverage," he said.

Some states, such as New York and Maryland, have moved to limit cost-shifting by prohibiting the negotiation of discounted rates by large

purchasers of health care. Others, such as Massachusetts, are considering a similar ban.

That has drawn fire from some HMOs, which claim they earn their discounts by holding down unnecessary use of health care services. "To control what we're doing in the name of protecting indemnity insurance companies is backwards," said Glenn Hackbarth, senior vice president of Harvard Community Health Plan, an HMO in the Boston area. "What we're doing produces the most value for society."

The Harvard HMO has negotiated steep discounts with Brigham and Women's Hospital and Beth Israel Hospital in Boston in exchange for guaranteeing them a large volume of patients. In exchange, "We work with them to manage care for those patients (so) they fit within that rate structure," said Mr. Hackbarth, a former deputy administrator of the Health Care Financing Administration.

But the gains made in controlling hospital costs usually are much less than the discounts. The State of Illinois, for instance, is trying to reduce hospital use by making employees seeking elective surgery call an outside firm for permission. The hospital stay won't be covered by insurance unless the review firm gives its approval.

In emergency situations, the state requires that the patient call the review firm within 48 hours. Benefits manager Calame estimates that this certification process, which allows the firm to monitor lengths of stay and appropriateness of care, saved the state $1 million last year.

The state also hired a firm to monitor very high-cost cases where recovery can drag on for months or years, such as when employees have been in a serious automobile accident. Calame estimated case management saved the state $2 million last year.

Many experts challenge the effectiveness of these types of review procedures. No matter. Taken at face value, the claimed savings are far less than either the discounts negotiated with hospitals or the overall increase in the state's health-care costs.

"Our members and dependents are seeing the doctor and going to the hospital more often; it's rising faster than the number of beneficiaries," said Ms. Calame. "We haven't sorted out why."

DESCRIPTORS: INSURANCE; HEALTH; RATE; US; STATISTIC
COMPANY NAMES (DIALOG GENERATED): A Foster Higgins & Co ; Benefits ; Beth Israel Hospital ; Brigham and Women 's Hospital ; Congressional Budget Office ; Gottlieb Memorial Hospital ; Harvard Community Health Plan ; Health Care Financing Administration ; Health Insurance Association of America ; Healthcare Financial Management Association

13/9/12 (Item 7 from file: 637)
DIALOG(R)File 637:Journal of Commerce

NEW SUMMARY
JOURNAL OF COMMERCE (JC) - THURSDAY February 2, 1989
Edition: FIVE STAR Section: FRONT Page: 2A
Word Count: 1,126

MEMO:
NEW SUMMARY. Briefs

TEXT:
* Trading with Morocco 4A

* Nigel Lawson - Europe's Escapist Dreams 8A

* Tom Connors - Washington 8A

Dennis Griesing - Oil Producers' Tired Catechism 8A

* Larry Kaufman - Inside Talk on Railroads 2B

* Sam Glasser - Inside Talk on Energy 7B
* Baton Rouge to Get New Dock by End of Year 10B

AIR CARGO

Market evaluation led British Airways to pioneer a new cargo route from Tampa, Fla., to Bermuda. 5B

The Justice Department has raised no objections to the proposed Tiger International/ Federal Express merger. 5B

AVIATION

Three safety task forces studying the dangers of aging aircraft intend to recommend hundreds of structural changes in the nation's jetliners. 5B

U.S., Chinese aviation officials recently concluded bilateral aviation discussions. 5B

COMMODITIES

A private survey shows U.S. farmers plan to sow 60.5 million to 64 million acres of soybeans, up from 1988's 58.8 million. 6A

Gold analysts at Merrill Lynch expect gold prices to remain lower for the near-term but strengthen later this year. 6A

The Zimbabwe sugar estates have developed into one of the most significant inland producers in the world. 6A

EDI

Sears Roebuck & Co. is introducing an EDI **network** . 1A

EDI will receive a big endorsement if Canadian Prime Minister Brian Mulroney will speak at an upcoming conference on the subject. 4B

A toy manufacturer finds EDI confusing, frustrating. 4B

EXPORTS

MicroAge Inc. is expected to be the first computer retail outlets in the Soviet Union to sell Western high-tech products. 1A

Franchising offers big opportunities for expanding trade with the Soviet Union, a businessman said. 1A

Port of Houston officials blame lack of adequate notification for the poor turnout at public ITC hearings on tariff cuts. 5A

Chrysler Corp.'s link-up with South Korea's Hyundai Motor Corp. to market the Sonata is "not a surprise," according to a leading auto analyst. 5A

China is about to get its first U.S. pizzeria in a joint venture with a New York group. 5A

FINANCIAL

A Japanese Ministry of Finance official said LDC debt will be one of the major topics at Friday's Group of Seven meeting in Washington. 7A

The holding company created by the Hunt brothers to service the family's business empire is being dissolved, a Dallas newspaper reported. 7A

W. German economists discount talk of a Bundesbank rate hike today. 7A

The dollar shifted lower on nervous profit-taking. 7A

GENERAL NEWS

The Japanese welcome President Bush's reported selection of Michael Armacost as the new U.S. ambassador to Japan. 1A

Chairman Ernest Hollings, D-S.C., said he will not block Senate Commerce Committee efforts to pass product liability law reforms this year. 1A

A key lawmaker warns business not to expect Congress to go much further to ease burdens of a controversial tax provision on benefits. 2A

IMPORTS

U.S. trade reprisals against Thailand's copyright and patent protection policies are less than they seem. 4A

Morocco's long-term prospects depend on it expanding to alternative market outlets and attracting private investment to sustain growth. 4A

U.S. specialty steel producers are starting their campaign for renewed import controls. 4A

Taiwan's labor unrest continues to spread, now bringing auto production at a Ford unit to a halt. 4A

INSURANCE

The nation's insurance regulators have decided to review insurance rate-making organizations and their impact on competition. 9A

The Travelers Insurance Co. will comply with, but appeal, a California **insurance** department order to **renew** 5,000 car insurance policies. 9A

Citizens' revolts against the insurance industry may boost the chances of legislation in Maryland. 9A

A jury awarded nearly $800,000 to the survivor of a 1987 Continental Airlines jetliner crash in Denver but dismissed a punitive damage claim. 9A

Pennsylvania auto insurers will be assessed 1 percent under new bill designed to bail out troubled catastrophic loss fund. 9A

MARITIME

The Department of Transportation gave bulk carriers the option of spreading their operating subsidies over more ships. 1A

The lack of crewmen visas resulted in the surprising seizure of a ship in Miami. 1A

Westwood Shipping Lines expects a small profit this year after years of losses. 1B

The Maritime Administration made technical changes in the way operating subsidy is paid for both liners and bulk carriers. 1B

A French government report criticizes results of a program to improve port productivity. 3B

The Maritime Administration issued interim rules that will implement congressional revisions to a 1920 ship mortgage law. 3B

The Port of Baton Rouge has started work on a new $8.58 million dock, scheduled for completion in November. 10B

Marad cleared International Shipholding Corp.'s acquisition of Waterman Marine Corp. and its subsidized interests. 10B

An Argentine supply ship sank in heavy seas after running aground off Antarctica. 10B

MIDAMERICA

Minnesota is kicking off the official opening of its new World Trade Conference Center next week with a special three-day trade conference. 3A

Chrysler is launching its new A-bodies as a replacement for the aging K-Car, and some of the new cars may be imported from Mexico. 3A

Michigan's progress toward building a full-scale private/public export trading company has slowed. 3A

For Toyota Motor Corp.'s automobile plant in Kentucky's Scott County, 1988 was a year of firsts. 3A

Now that the steel industry is making a comeback, the Rust Belt city of Gary, Ind., is on the mend, too. 3A

OIL AND GAS

Gasoline and distillate stocks increased as mild weather cut the usual seasonal drawdowns, the American Petroleum Institute said. 6B

U.S. refiners hope to increase their share of the domestic gasoline market by sprucing up service stations and boosting marketing efforts. 7B

OPINION

For all Mr. Bush's stress on volunteer effort, he may have to rely on the government to handle some of the problems cited in his inaugural speech. 8A

Some argue that the goal of monetary union is of such importance that we should impose whatever political union is necessary to achieve it. 8A

Much of the popular anti-oil import doctrine no longer reflects reality, and U.S. policy should reflect the changes. 8A

PLASTICS/CHEMICALS

Dow Chemical seeks Argentine approval for a $600 million debt-for-equity swap plan to finance petrochemical plants Dow would build there. 1A

Himont Inc. chairman is not worried about the growing glut of world polypropylene capacity. 9B

Africa's insistence on banning toxic waste will complicate talks with Europe for an accord on waste exports in developing countries. 9B

A new study may help New Jersey counties with solid waste disposal problems. 9B

Polaroid filed suit charging that Shamrock Holdings broke federal securities laws when itsolicited proxies from Polaroid shareholders. 9B

TRUCKING

Ryder System Inc. said it will sell several subsidiaries, including its

full truckload motor carrier. 2B

WORLD TRADE

Congress will take up U.S.-Soviet trade issues this year, an ex-congressman predicted. 2A

DESCRIPTORS: SUMMARY
COMPANY NAMES (DIALOG GENERATED): American Petroleum Institute ; British Airways ; Bundesbank ; Chrysler Corp ; Continental Airlines ; Department of Transportation ; Dow Chemical ; EDI ; Himont Inc ; Hyundai Motor Corp ; International Shipholding Corp ; Japanese Ministry of Finance ; Justice Department ; K Car ; Maritime Administration ; Merrill Lynch ; MicroAge Inc ; Polaroid ; Ryder System Inc ; Sears Roebuck & Co ; Senate Commerce Committee ; Shamrock Holdings ; Tiger International/Federal Express ; Toyota Motor Corp ; Travelers Insurance Co ; Waterman Marine Corp ; Westwood Shipping Lines ; World Trade Conference Center

13/9/13 (Item 8 from file: 637)
DIALOG(R)File 637:Journal of Commerce

INSURANCE MART URGED TO EMBRACE COMPUTERS
JOURNAL OF COMMERCE (JC) - THURSDAY November 3, 1988
By: JANET PORTER Journal of Commerce Staff
Edition: FIVE STAR Section: FRONT Page: 1A
Word Count: 501

MEMO:
ELECTRONIC DATA INTERCHANGE

See also: **INSURANCE** BROKERS FAILED TO **RENEW** POLICIES IN RIG LOSS,11/03/88, page 1A, which is included in DIALOG as a separate document.

TEXT:
LONDON - Slow and outdated business practices are to blame for the plight in which several Lloyd's insurance brokers now find themselves.

Delays in placing reinsurance business for the Piper Alpha rig could have been avoided if the Lloyd's insurance market was computerized, an insurance consultant told a conference on electronic data interchange in London Wednesday.

As it is, reinsurance coverage expired a week before the rig exploded, and some brokers were still trying to place business several days after the accident.

Ake Nilson, manager of the EDI consulting company Marinade Ltd., told the EDI '88 conference in London Wednesday that the use of electronic messaging systems would help to make the Lloyd's insurance market far more efficient.

At the moment, brokers have to line up to see each underwriter about a particular line of cover and may spend several days getting round the market before a large risk is fully underwritten.

Not only would online data systems enable information to be circulated around the market much more quickly, but underwriters would also be able to assess risks more effectively, Mr. Nilson claimed.

In the transport industry, for example, a shipper could include its insurer in all electronic transmissions related to a particular consignment. This would allow underwriters to build up a much clearer and more accurate picture of the day-to-day activities of his client and of the

distribution business generally, Mr. Nilson said.

Lloyd's of London has told all underwriters to join the London Insurance Market **Network** (Limnet) by early 1990 so that claims can be processed electronically. But the more controversial issue of negotiating insurance business by computer is still a long way off.

Mr. Nilson, who was an underwriter with a cargo insurance firm before he set up his own consultancy earlier this year, acknowledges that it will be a while before EDI is fully accepted by the insurance industry.

He believes, though, that the London insurance market stands to gain more than most from electronic **network** systems because of the complex nature of the market. Conversely, Lloyd's will lose business to other markets if current procedures are not overhauled, he warns.

He told delegates that London's insurance industry faces an unprecedented challenge, not only from new market practices being introduced elsewhere, but also from the European Community's single market initiative to remove trade barriers within the EC by the end of 1992.

Brokers, for example, may have to rethink their position if clients find they can talk directly to underwriters electronically. Likewise, other long-established business arrangements may be called into question as EDI forces all sectors of industry to review trading practices.

However, one sector of Britain's insurance industry is fully committed to paperless trading. From Monday, all members of the Policy Signing and Accounting Centre, which represents U.K. insurance companies writing non-marine business, will be processing all claims electronically.

DESCRIPTORS: INSURANCE; TELECOMMUNICATION; COMPUTER; REINSURANCE; REORGANIZATION; LONDON; UK
COMPANY NAMES (DIALOG GENERATED): Accounting Centre ; EDI ; Limnet ; London Insurance Market **Network** ; Marinade Ltd

13/9/14 (Item 9 from file: 637)
DIALOG(R)File 637:Journal of Commerce

INSURERS LASH OUT AT CALIF. PROBES
JOURNAL OF COMMERCE (JC) - TUESDAY August 26, 1986
By: C.A. CARPENTER Journal of Commerce Staff
Edition: FIVE STAR Section: INSURANCE Page: 10A
Word Count: 495

TEXT:
Hearings into potential criminal practices within the California insurance industry were moved up to Monday in response to wishes of one of some 125 insurers under investigation following the collapse of the municipal liability insurance market.

Meanwhile, the California Insurance Department challenged insurance rates set by about 20 insurance companies following its own investigation into the commercial insurance industry's rate-making procedures.

Both investigations by the department and the California attorney general, however, also are spurring accusations that they may be politically motivated.

Roxani Gillespie, state insurance commissioner, said the attorney general's investigation raises a question in my mind" since Attorney General John Van de Kamp is running for re-election next month.

He believes, though, that the London insurance market stands to gain more than most from electronic **network** systems because of the complex nature of the market. Conversely, Lloyd's will lose business to other markets if current procedures are not overhauled, he warns.

He told delegates that London's insurance industry faces an unprecedented challenge, not only from new market practices being introduced elsewhere, but also from the European Community's single market initiative to remove trade barriers within the EC by the end of 1992.

Brokers, for example, may have to rethink their position if clients find they can talk directly to underwriters electronically. Likewise, other long-established business arrangements may be called into question as EDI forces all sectors of industry to review trading practices.

However, one sector of Britain's insurance industry is fully committed to paperless trading. From Monday, all members of the Policy Signing and Accounting Centre, which represents U.K. insurance companies writing non-marine business, will be processing all claims electronically.

DESCRIPTORS: INSURANCE; TELECOMMUNICATION; COMPUTER; REINSURANCE; REORGANIZATION; LONDON; UK
COMPANY NAMES (DIALOG GENERATED): Accounting Centre ; EDI ; Limnet ; London Insurance Market **Network** ; Marinade Ltd

13/9/14 (Item 9 from file: 637)
DIALOG(R)File 637:Journal of Commerce

INSURERS LASH OUT AT CALIF. PROBES
JOURNAL OF COMMERCE (JC) - TUESDAY August 26, 1986
By: C.A. CARPENTER Journal of Commerce Staff
Edition: FIVE STAR Section: INSURANCE Page: 10A
Word Count: 495

TEXT:
Hearings into potential criminal practices within the California insurance industry were moved up to Monday in response to wishes of one of some 125 insurers under investigation following the collapse of the municipal liability insurance market.

Meanwhile, the California Insurance Department challenged insurance rates set by about 20 insurance companies following its own investigation into the commercial insurance industry's rate-making procedures.

Both investigations by the department and the California attorney general, however, also are spurring accusations that they may be politically motivated.

Roxani Gillespie, state insurance commissioner, said the attorney general's investigation raises a question in my mind" since Attorney General John Van de Kamp is running for re-election next month.

He also was one of the highest-ranking public officials to oppose Proposition 51, which California voters in June endorsed by a 62 percent majority. The insurance industry supported the measure, which excluded non-economic damages such as pain and suffering from the so-called deep pocket doctrine of joint and several liability.

But consumer groups questioned the department's motivations, too. There's extraordinary pressure on the department to perform because (Gov. George) Deukmejian is running for election," said Steven Miller, executive

director of Insurance Consumer Action **Network** .

Ms. Gillespie denied political motivations.

As far as I'm concerned, we just got right" down to business following her appointment in July, she said.

Thomas P. Dove, deputy attorney general in San Francisco, also denied ulterior motives. He called Ms. Gillespie's charges ludicrous and offensive," noting that pre-election surveys give Mr. Van de Kamp a 72 percent lead over the competition. He also said municipal insurance buyers began complaining about the industry more than a year ago.

In January this year, the formal complaint spurring the attorney general's investigation was filed by Mayor Richard Holmes of Lafayette. By April this year, Mr. Dove noted that only Planet Insurance, a unit of Reliance **Insurance** , was writing municipal liability, and only **renewal** business. That compares with about 1,400 insurers in the market earlier last year.

His office began issuing subpoenas to some 125 insurers on Aug. 11 to begin six weeks of hearings originally starting Sept. 8 on charges of antitrust violations and unfair trade practices. Mr. Dove said the hearings were pushed forward to Monday in response to wishes of one company that he declined to identify.

He declined to name those subpoenaed, noting that potentially a criminal investigation" would result.

He said other states also investigating potential antitrust violations in the insurance industry include Texas, where a formal investigation also is under way, and Oregon, Colorado, Massachusetts and a half dozen other states," where they're looking at the problem."

Ms. Gillespie said field examiners with the department have reviewed about 50 insurance companies since March 1985, when the department revived its field examination program by hiring six new examiners.

The program had been discontinued in 1980 during the administration of Gov. Edmund G. Brown Jr.

Ms. Gillespie said the department's hearings will resume today.

DESCRIPTORS: INSURANCE; LIABILITY; CALIFORNIA; RATE; LEGAL
COMPANY NAMES (DIALOG GENERATED): Insurance Consumer Action **Network** ;
Planet Insurance ; Reliance Insurance

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